

Lincoln Police Department  
Thomas K. Casady, Chief of Police  
575 South 10th Street  
Lincoln, Nebraska 68508

402-441-7204  
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 14, 2004

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Foxy Lady Lounge, 1823 'O' Street requesting an addition to their current liquor license.

The area request is an expansion of the current outdoor beer garden measuring approximately 22 x 17 foot on the south side of the business. The requested new area requested is 32 x 22 foot.

The Lincoln Police Department recommends denial of this expansion to the beer garden as it is still unknown if exotic dancing will be occurring in this outdoor area, and if not have concerns that other possible illegal activity may occur.

For Council's information, the owners of the business remain the same, and background information on the owners is on file.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency

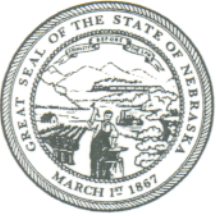


# STATE OF NEBRASKA

*Run*

*Set date: 1-10-05*

*Pit: 1-24-05*



**Mike Johanns**  
Governor

## NEBRASKA LIQUOR CONTROL COMMISSION

**Hobert B. Rupe**

Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

December 7, 2004

*A4-137141*

*72*

City Clerk  
555 South 10<sup>th</sup> Street  
Lincoln NE 68508-3993

RE: Jerry & Sandy Irwin  
dba Foxy Lady  
1823 "O" Street  
Lincoln, Lancaster Co., NE, 68508

Dear Clerk:

The above referenced licensee has requested permission for an addition of a beer garden approx 15' x 15' on the south side of the licensed premise. Making the license description to read: Entire first floor of bldg approx 24' x 92' plus beer garden to the south approx 32' x 22'.

Please present this request for addition to premise to your Council and send us the results of that action.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

*Michelle Porter*

Michelle Porter  
Licensing Division

Enclosure

cc: file

NEBRASKA  
CITY OF LINCOLN

2004 DEC -9 P 1:09

**Rhonda R. Flower**  
Commissioner

**Bob Logsdon**  
Chairman

FILED  
CITY CLERKS OFFICE

**R.L. (Dick) Coyne**  
Commissioner

An Equal Opportunity/Affirmative Action Employer

PLEASE COMPLETE AND RETURN TO:  
NE LIQUOR CONTROL COMMISSION  
PO BOX 95046  
LINCOLN, NE 68509-5046

RECEIVED

DEC - 7 2004

NEBRASKA LIQUOR  
CONTROL COMMISSION

FEE OF \$45.00 REQUIRED

LICENSEE'S NAME: JERRY + SANDI IRWIN

TRADE NAME: FOX4 LADY

PREMISE ADDRESS: 1823 "O"

CITY/COUNTY: LINCOLN / LANCASTER NEBR

LICENSE NUMBER: 66382 TELEPHONE: 402-435-0890

PLEASE CHECK ONE OF THE FOLLOW

☒ ADDITION/ RECONSTRUCTION    ☐ CHANGE OF LOCATION    ☐ DELETION

☐ CHANGE OF LOCATION (this application will not be accepted if the license is moving into another jurisdiction)

Address From: \_\_\_\_\_  
Indicate local governing body jurisdiction; city or county \_\_\_\_\_

Address To : \_\_\_\_\_  
Indicate local governing body jurisdiction; city or county \_\_\_\_\_

- 1) INCLUDE A SKETCH OF THE PROPOSED AREA TO BE LICENSED (8½ x 11 PAPER - BLUEPRINTS NOT ACCEPTED) INDICATE THE DIMENSIONS OF THE AREA TO BE LICENSED AND THE DIRECTION 'NORTH' ON THE SKETCH
- 2) SUBMIT A COPY OF YOUR LEASE OR DEED DEMONSTRATING OWNERSHIP
- 3) IF YOU DO NOT KNOW WHAT JURISDICTION YOU ARE LOCATED IN, CALL THE CITY OF COUNTY CLERK
- 4) IN ORDER TO CLARIFY YOUR CHANGES, AN ATTACHED EXPLANATION IS ALWAYS WELCOME

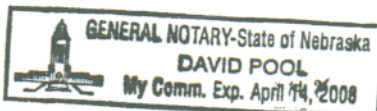
# 88-39352

AFFIDAVIT

THE ABOVE REFERENCE REQUEST, AS FILED, WILL COMPLY WITH THE RULES AND REGULATIONS OF THE NEBRASKA LIQUOR CONTROL ACT.

Jerry Irwin  
SIGNATURE OF LICENSEE

SUBSCRIBED IN MY PRESENCE AND FIRST DULY SWORN TO BEFORE ME ON THIS 30 DAY OF Nov, 2004



NOTARY PUBLIC'S SIGNATURE & SEAL

Bas Ct # 42162  
\$45- mm

FOXY LADY

RECEIVED

DEC - 7 2004

NEBRASKA LIQUOR  
CONTROL COMMISSION

per phone Jerry 12/7



I want to expand the new beer garden





Lincoln Police Department  
Thomas K. Casady, Chief of Police  
575 South 10th Street  
Lincoln, Nebraska 68508

402-441-7204  
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 22, 2004

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Hy-Vee, 7151 Stacy Lane requesting a class C liquor license.

This location currently holds a class D/K liquor license.

For Councils information if issued the class C liquor licenses allow for on premise consumption. It has been stated that the request for the class C liquor license is to be used for sampling purposes only.

If this application is approved the Lincoln Police Department requests the following conditions be added to the liquor license:

**The on premise consumption of alcohol shall be limited to samplings of 2 ounces or less of any alcoholic beverage.**

Background information on the manager and stockholders is on file an available for review on your request.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

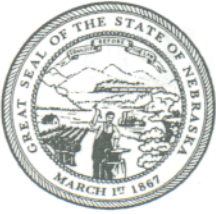


A nationally accredited law enforcement agency



# STATE OF NEBRASKA

1/24/05



Mike Johanns  
Governor

## NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe  
Executive Director

301 Centennial Mall South, 5th Floor  
P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

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web address: <http://www.nol.org/home/NLCC/>

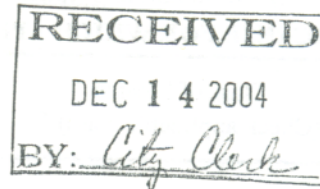
December 13, 2004

Lincoln City Clerk  
555 S. 10<sup>th</sup> Street  
Lincoln, NE 68508

Hy Vee #5  
7151 Stacy Lane  
Class C

A4-140391  
183

Re: Liquor application for HyVee #5



Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

### TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Tami Freeman  
Licensing Division

Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001  
REV. 12/99

21

# C - 66563

## APPLICATION FOR LICENSE

Nebraska Liquor Control Commission  
PO Box 95046,  
301 Centennial Mall South  
Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>  
Phone: (402) 471-2571  
Fax: (402) 471-2814

# RECEIVED

DEC - 9 2004

Upgrade from DL-41697

## NEBRASKA LIQUOR CONTROL COMMISSION

**INSTRUCTIONS:** Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in **Triplicate** 8. Required areas marked by a red asterisk ( \* )

### CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input checked="" type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.



TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WITH APPLICATION	
Type of application being applied for (check appropriate box)		
1. <input type="radio"/> Individual License requires Form 1 to be attached.	Name Jill Lalone	
2. <input type="radio"/> Partnership License requires Form 2 to be attached.	Firm Name Hy-Vee, Inc.	Address 5820 Westown Parkway
3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached		

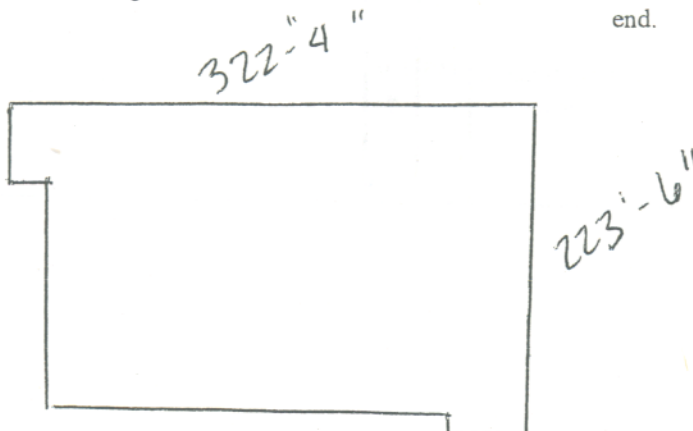
SECTION A – LOCATION INFORMATION – Must be completed by all applicants			
Trade Name (name of business) Hy-Vee (#5)		Telephone Number at premise to be licensed 402-489-4244	
1) Street Address of Proposed licensed premise 7151 Stacy Lane		2) Mailing Address for receipt of Liquor Control Commission mailings 5820 Westown Parkway	
City Lincoln	County Lancaster	City 5820 Westown Pa	County Polk
Zip Code 68516	Is this located inside the city limits? <input checked="" type="radio"/> Yes <input type="radio"/> No	Zip Code 50266	

### DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.



*No basement*



SECTION B OTHER INFORMATION REQUIRED *			
	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed
<p>* 1. <b>READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	

<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Midwest Heritage Bank 1025 Braden Chariton, IA 50049  Richard Jurgens - President John Briggs - Treasurer</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>Please see attached</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Scott Schlatter</p>		

13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	Store Director for almost 5 years		
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)	Please see attached		
15. When do you intend to open for business?	This location is already open, it is currently run under license DK41697.		
16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.			
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
See attached			



16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

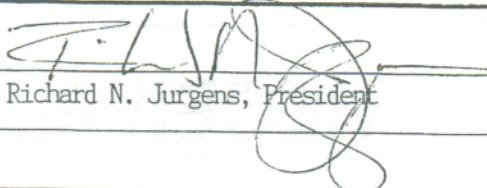
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Richard N. Jurgens	1992	Present	West Des Moines, IA
Carol Jurgens	Same	-	-

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

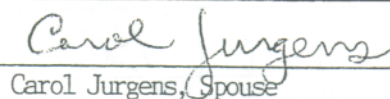
Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign  
here  
sign  
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Richard N. Jurgens, President

sign  
here  
sign  
here  
sign  
here  
sign  
here

  
Carol Jurgens, Spouse

Subscribed in my presence and sworn to before me this

22<sup>nd</sup>

day of

November

2004

**RECEIVED**

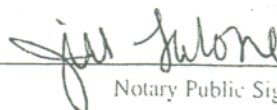
(SEAL)

DEC - 9 2004



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

NEBRASKA LIQUOR CONTROL COMMISSION

  
Notary Public Signature



16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Charles M. Bell	1985	1994	Chariton, IA
"	1994	Present	Des Moines, IA

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Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign  
here  
  
sign  
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sign  
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sign  
here

*Charles M. Bell*  
Charles M. Bell, Exec. V.P.

sign  
here  
  
sign  
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sign  
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sign  
here

**RECEIVED**

DEC - 9 2004

NEBRASKA LIQUOR  
CONTROL COMMISSION

Subscribed in my presence and sworn to before me this

22nd

day of

November

2004

(SEAL)



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

sign  
here

*Jill Lalone*

Notary Public Signature

FORM 35-20.0

Rev. '90

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Stephen P. Meyer	1992	Present	Des Moines, IA

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

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sign here \_\_\_\_\_  
 sign here Stephen P. Meyer, Secretary  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_

sign here  
 sign here  
 sign here  
 sign here  
 sign here

SINGLE

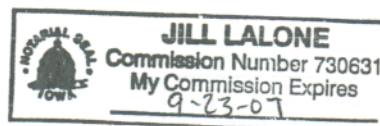
**RECEIVED**

DEC - 9 2004

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

Subscribed in my presence and sworn to before me this 22nd day of November, 2004.

(SEAL)



sign here

*Jill Lalone*

Notary Public Signature

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16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
John C. Briggs	1985	1994	Chariton, IA
"	1994	Present	Waukee, IA
Dianne Briggs	same	-	-

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

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sign  
here

John C. Briggs, Treasurer

sign  
here

sign  
here

sign  
here

sign  
here

Dianne Briggs, Spouse

sign  
here

sign  
here

sign  
here

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DEC - 9 2004

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

Subscribed in my presence and sworn to before me this

22nd

day of

November

2004

(SEAL)



sign  
here

Jill Lalone

Notary Public Signature

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM LS-400  
1  
Rev. 5/01

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Stephen P. Meyer	1992	Present	Des Moines, IA

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25 % of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

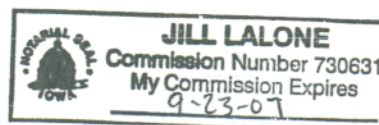
sign here Stephen P Meyer  
 sign here Stephen P. Meyer, Secretary  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_

sign here SINGLE  
 sign here DEC - 9 2004  
 sign here NEBRASKA LIQUOR  
 sign here CONTROL COMMISSION

RECEIVED

Subscribed in my presence and sworn to before me this 22nd day of November, 2004.

(SEAL)



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

sign here Jill Lalone  
 Notary Public Signature



**Corporation/LLC Application for License - Form 3**  
Nebraska Liquor Control Commission

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**NEBRASKA LIQUOR  
CONTROL COMMISSION****INSTRUCTIONS:**

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: **a)** each stockholder owning over 25% of the stock, **b)** chief executive officer, **c)** proposed manager and **d)** all spouses
- 3) Information regarding spouses must be completed

Required areas marked by a red asterisk ( \* )

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

Hy-Vee, Inc. \*

Total Number of Shares (if corporation)

16,666,200 \*

Corporate Street Address

5820 Westown Parkway \*

Mailing address for receipt of Liquor Control Commission Mailings

5820 Westown Parkway \*

Corporate Telephone Number

515-267-2800 \*

City

West Des Moines \*

County

Polk \*

State

Iowa \*

Zip Code

50266 \* -

Name of Registered Agent

x \*

Name of Proposed Manager

Scott Schlatter \*

**IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER**

Name

Richard N. Jurgens \*

Title

President, CEO \*

Date of Birth

Social Security Number

\* \*

Home Address (1)

3008 Jordan Grove \*

City

West Des Moines \*

State

Iowa \*

Zip Code

50265 \* -

Home Telephone Number

515-267-2800 \*

**PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES**Name of Officers, Directors, Members and Spouses.  
**Give Last Name, First Name, Middle, Maiden, and any aliases**Social Security  
Number

Date of Birth

Title

Name

Jurgens, Richard N.

President, CEO

Spouse Name

Jurgens, Carol Jean, Gaffney

Partner Number of Shares / % 250,117

Spouse Number of Shares / %

Name of Officers, Directors, Members and Spouses.

<b>Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name Bell, Charles			Executive VP
Spouse Name			
Partner Number of Shares / % 347,002	Spouse Number of Shares / %		
<b>Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name Meyer, Stephen P.			Secretary
Spouse Name			
Partner Number of Shares / % 153,692	Spouse Number of Shares / %		
<b>Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name Briggs, John C.			Treasurer
Spouse Name Briggs, Diane L. Herrin			
Partner Number of Shares / % 59,048	Spouse Number of Shares / %		
<b>Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases</b>	<b>Social Security Number</b>	<b>Date of Birth</b>	<b>Title</b>
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

(If Necessary, Continue on Separate Sheet)

Is this Corporation/LLC controlled by another Corporation?

Yes ☐ No ☒

Name of control Corporation

If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: October 01 Ending date: September 30

State of Iowa

)

) ss.

Polk County

)



*Jill Lalone*

Notary Public Signature & Seal

By *[Signature]*  
President/Member Richard W. Jurgens

*Stephen P. Meyer*  
Secretary/Member Stephen P. Meyer

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Verify Form and Print

FORM 35-4183  
REV. 02/01

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NEBRASKA LIQUOR  
CONTROL COMMISSION



## Application for Corporate Manager

**\*Must Be A Nebraska Resident\***

**Please submit in Triplicate**

Return to: Nebraska Liquor Control Commission, PO Box 95046  
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk ( \* )

### LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Hy-Vee, Inc.

Class & License number

C

Trade Name of Licensed Premise

Hy-Vee #5

Street Address of Licensed Premise

7151 Stacy Lane

City

Lincoln

County

Lancaster

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO

### APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Schlatter, Scott, A.

Sex \*

F

M

Social Security Number

Date of Birth

Place of Birth

Sumner, Iowa

Home Street Address

5932 South 81st Street

City

Lincoln

County

Lancaster

State

NE

Zip Code

68516

Home Telephone Number

402-483-2137

Business Telephone Number

402-489-4244

Drivers License Number

H13058675

State

NE

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DEC - 9 2004

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

Are You Married? \* Yes ☒ No ☐ If Yes, You must complete the following:

**SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)**

Full Name (Last, First, Middle, Maiden)

Schlatter, Deb

Social Security Number

Drivers License Number

State

NE

Date of Birth

Place of Birth

West Union, Iowa

\* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No

☐ ☒

\* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No

☒ ☐

Hy-vee Food & Drugstore 5  
7151 Stacy Lane

41697

5/1/04 - 4/30/05

\* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No

☐ ☒

\* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?

Nebraska Liquor Control Act (§53-131.01)

Yes No

☒ ☐

\* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No

☐ ☒

CARDS ON FILE

**RESIDENCES FOR PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE**

Year

From To

Applicant: City &amp; State

5932 So 81<sup>st</sup> Lincoln NE 2003 Present

Spouse: City &amp; State

5932 So 81<sup>st</sup> Lincoln NE 2003 Present

Year

From To

Applicant: City &amp; State

1109 NE Depot Drive Lees Summit MO 2000 2003

Spouse: City &amp; State

1109 NE Depot Drive Lees Summit MO 2000 2003

Year

From To

Applicant: City &amp; State

7549 Hayes Circle Kalston NE 1995 2000

Spouse: City &amp; State

7549 Hayes Circle Kalston NE 1995 2000

Year

From To

Applicant: City &amp; State

Spouse: City &amp; State

**EMPLOYERS - LIST LAST TWO EMPLOYERS**

Year

From To

Name of Employer

Hy-Vee Inc 1990 Present

Name of Supervisor

Pat Hensley Telephone Number 402-578-7865

Year

From To

Name of Employer

MBC Foods 1989 1990

Name of Supervisor

Telephone Number



Rich BakerNA

**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY  
APPLICANT & SPOUSE**

STATE OF NEBRASKA )

) SS

COUNTY OF )

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

*Rich Baker*  
Signature of Applicant

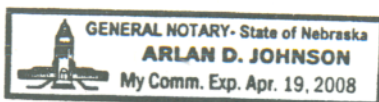
*Deborah Baker*  
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this  
9 day of December 2004.

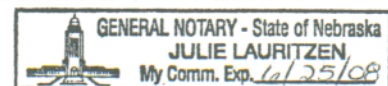
Subscribed in my presence and sworn to before me this  
7<sup>th</sup> day of December 2004.

*Arland D. Johnson*  
Notary Signature & Seal

*Julie Lauritzen*  
Notary Signature & Seal



Verify and Print



**RECEIVED**

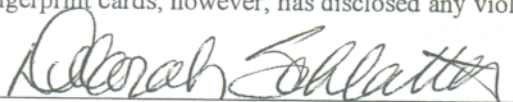
FORM 35-4013  
REV. 2/01

DEC - 9 2004

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

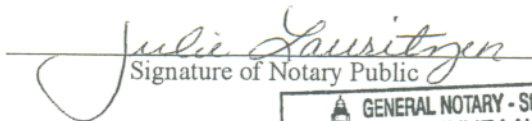
**NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION**

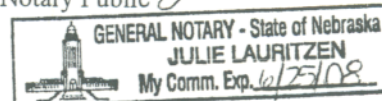
The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.



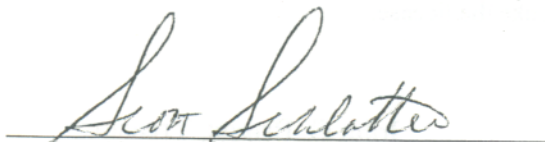
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 7<sup>th</sup> day of December, A.D., 2004.

  
Signature of Notary Public

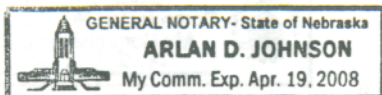


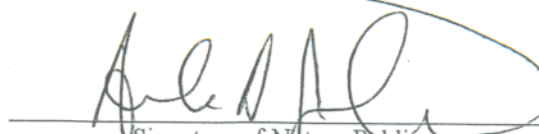
The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

  
Signature of Licensee/Applicant

Scott Schlatte  
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 9<sup>th</sup> day of December, A.D., 2004.



  
Signature of Notary Public

**RECEIVED**

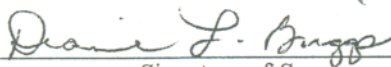
DEC - 9 2004

FORM 35-4178  
REV 2/01

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

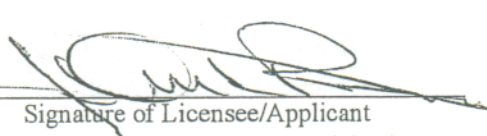
  
Signature of Spouse **Dianne L. Briggs**

SUBSCRIBED in my presence and sworn to before me this 22<sup>nd</sup> day of November, A.D., 2004



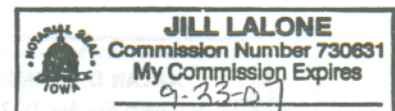
  
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

  
Signature of Licensee/Applicant

**John C. Briggs, Treasurer**  
\_\_\_\_\_  
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 22<sup>nd</sup> day of November, A.D., 2004



  
Signature of Notary Public

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DEC - 9 2004

FORM 35-4178  
REV 2/01

**NEBRASKA LIQUOR  
CONTROL COMMISSION**



# NEBRASKA LIQUOR CONTROL COMMISSION AFFIDAVIT OF NON PARTICIPATION

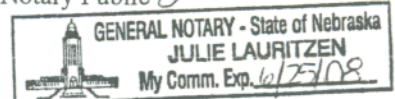
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*Deborah Schlatte*

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 7<sup>th</sup> day of December, A.D., 2004.

*Julie Lauritzen*  
Signature of Notary Public

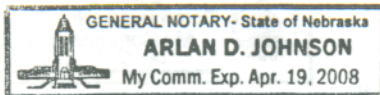


The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

*Scott Schlatte*  
Signature of Licensee/Applicant

Scott Schlatte  
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 9<sup>th</sup> day of December, A.D., 2004.



*Arlan D. Johnson*  
Signature of Notary Public

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DEC - 9 2004

FORM 35-4178  
REV 2/01

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION**

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Dianne L. Briggs

Signature of Spouse Dianne L. Briggs

SUBSCRIBED in my presence and sworn to before me this 22<sup>nd</sup> day of November, A.D., 2004



Jill Lalone

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]  
Signature of Licensee/Applicant

John C. Briggs, Treasurer

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 22<sup>nd</sup> day of November, A.D., 2004



Jill Lalone

Signature of Notary Public

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DEC - 9 2004

FORM 35-4178  
REV 2/01

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION**

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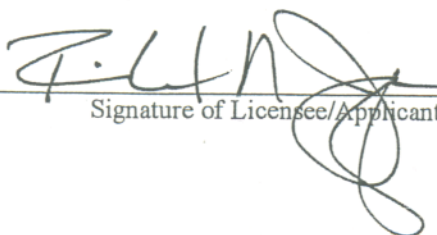
Signature of Spouse **Carol J. Jurgens**

SUBSCRIBED in my presence and sworn to before me this 22<sup>nd</sup> day of November, A.D., 2004



Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

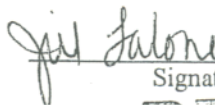


Signature of Licensee/Applicant

**Richard N. Jurgens, President**

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 22<sup>nd</sup> day of November, A.D., 2004



Signature of Notary Public

**RECEIVED**

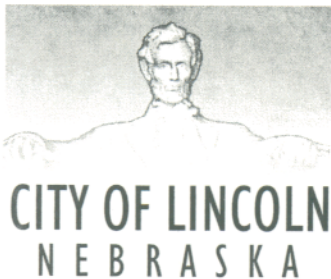
FORM 35-4178

DEC - 9 2004

REV 2/01

**NEBRASKA LIQUOR  
CONTROL COMMISSION**





Lincoln Police Department  
Thomas K. Casady, Chief of Police  
575 South 10th Street  
Lincoln, Nebraska 68508

402-441-7204  
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 22, 2004

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of N-Zone Bar, 728 'Q' Street requesting an addition to their current liquor license CK-43717.

The area request is an outdoor beer garden measuring approximately 11 x 9 foot on the north side of the business.

For Council's information, the owners of the business remain the same, and background information on the owners is on file.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency

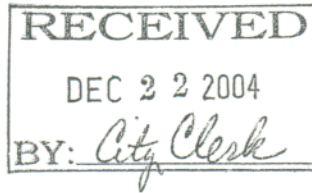


# STATE OF NEBRASKA

1-24-04



**Mike Johanns**  
Governor



**NEBRASKA LIQUOR CONTROL COMMISSION**  
**Robert B. Rupe**  
Executive Director  
301 Centennial Mall South, 5th Floor  
P.O. Box 95046  
Lincoln, Nebraska 68509-5046  
Phone (402) 471-2571  
Fax (402) 471-2814  
TRS USER 800 833-7352 (TTY)  
web address: <http://www.nol.org/home/NLCC/>

December 21, 2004

Lincoln City Clerk  
555 South 10<sup>th</sup> Street  
Lincoln, NE 68508

A4-140392  
210

RE: Geemax, Inc dba The N-Zone  
Lincoln CK-43717

The above referenced licensee has submitted a request for **Addition**. See attached request & map.

**Addition request is to add a Beer Garden to the North side  
of Premise. Addition is approx 11' x 9'.**

Please present this request for **Addition** to your board and send us the results of that action.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION



Tami Freeman  
Licensing Division

tf

cc: file

**Rhonda R. Flower**  
Commissioner

**Bob Logsdon**  
Chairman

**R.L. (Dick) Coyne**  
Commissioner

*An Equal Opportunity/Affirmative Action Employer*

Printed with soy ink on recycled paper

## PLEASE COMPLETE AND RETURN TO:

NE LIQUOR CONTROL COMMISSION  
PO BOX 95046  
LINCOLN, NE 68509-5046

REQUEST FOR ADDITION, DELETION, RECONSTRUCTION  
& CHANGE OF LOCATION

FEE OF \$45 REQUIRED

LICENSEE'S NAME: Geemax Inc.  
TRADE NAME: The N-Zone  
PREMISE ADDRESS: 728 Q St  
CITY/COUNTY: Lincoln - Lancaster  
TELEPHONE: 402-475-8683  
LICENSE NUMBER: ~~HK 33617~~ CK 43717

**RECEIVED**

DEC 20 2004

NEBRASKA LIQUOR  
CONTROL COMMISSION

PLEASE CHOOSE ONE OF THE FOLLOWING

- ☒ ADDITION TO LICENSED PREMISE OR  
RECONSTRUCTION  
☐ DELETION TO LICENSED PREMISE  
☐ RECONSTRUCTION

- ☐ CHANGE OF LOCATION (this application will not  
be accepted if the license is moving into another  
jurisdiction)

ADDRESS  
FROM:

local  
governing  
body  
jurisdiction:  
city  
or  
county

ADDRESS  
TO:

RCPT. 135051  
USD 9198/\$45



local  
governing  
body  
jurisdiction:  
city  
or  
county

- INCLUDE A SKETCH OF THE PROPOSED AREA TO BE LICENSED (8 1/2 x 11 PAPER-BLUEPRINTS NOT ACCEPTED) INDICATE THE DIMENSIONS OF THE AREA TO BE LICENSED AND THE DIRECTION "NORTH" ON THE SKETCH
- SUBMIT A COPY OF YOUR LEASE OR DEED DEMONSTRATING OWNERSHIP
- IF YOU DO NOT KNOW WHAT JURISDICTION YOU ARE LOCATED IN, CALL THE CITY OR COUNTY CLERK
- IN ORDER TO CLARIFY YOUR CHANGES, AN ATTACHED EXPLANATION IS ALWAYS WELCOME

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**NEBRASKA LIQUOR  
CONTROL COMMISSION****AFFIDAVIT**

THE ABOVE REFERENCE REQUEST, AS FILED, WILL COMPLY  
WITH THE RULES AND REGULATIONS OF THE NEBRASKA  
LIQUOR CONTROL ACT.

Mike McCarty - owner  
SIGNATURE OF LICENSEE

Patricia A. McCarty - president

SUBSCRIBED IN MY PRESENCE AND FIRST DULY SWORN TO  
BEFORE ME ON THIS

20<sup>th</sup> DAY OF December, 2004.

Stacy M Durr



12/17/04

The proposed addition to our existing liquor license would allow our patrons to step outside and smoke while retaining their drink. The addition is located at the rear of The N-Zone, below ground, at the bottom of the existing steps. There would be a gate installed that says NO DRINKS BEYOND THIS POINT. The addition is not visible to anyone in the area. It is below ground, surrounded in concrete walls. It would have benches along the walls, large ashtrays and space heaters. There would be no sound issues to anyone in the immediate area.

The dimensions are drawn on the attached sheets.

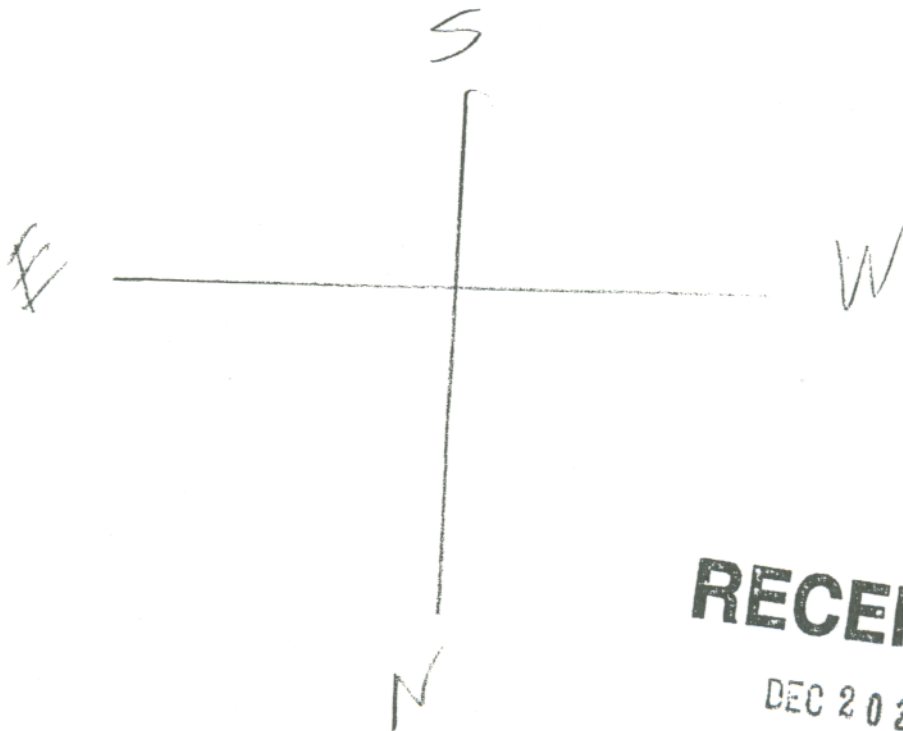
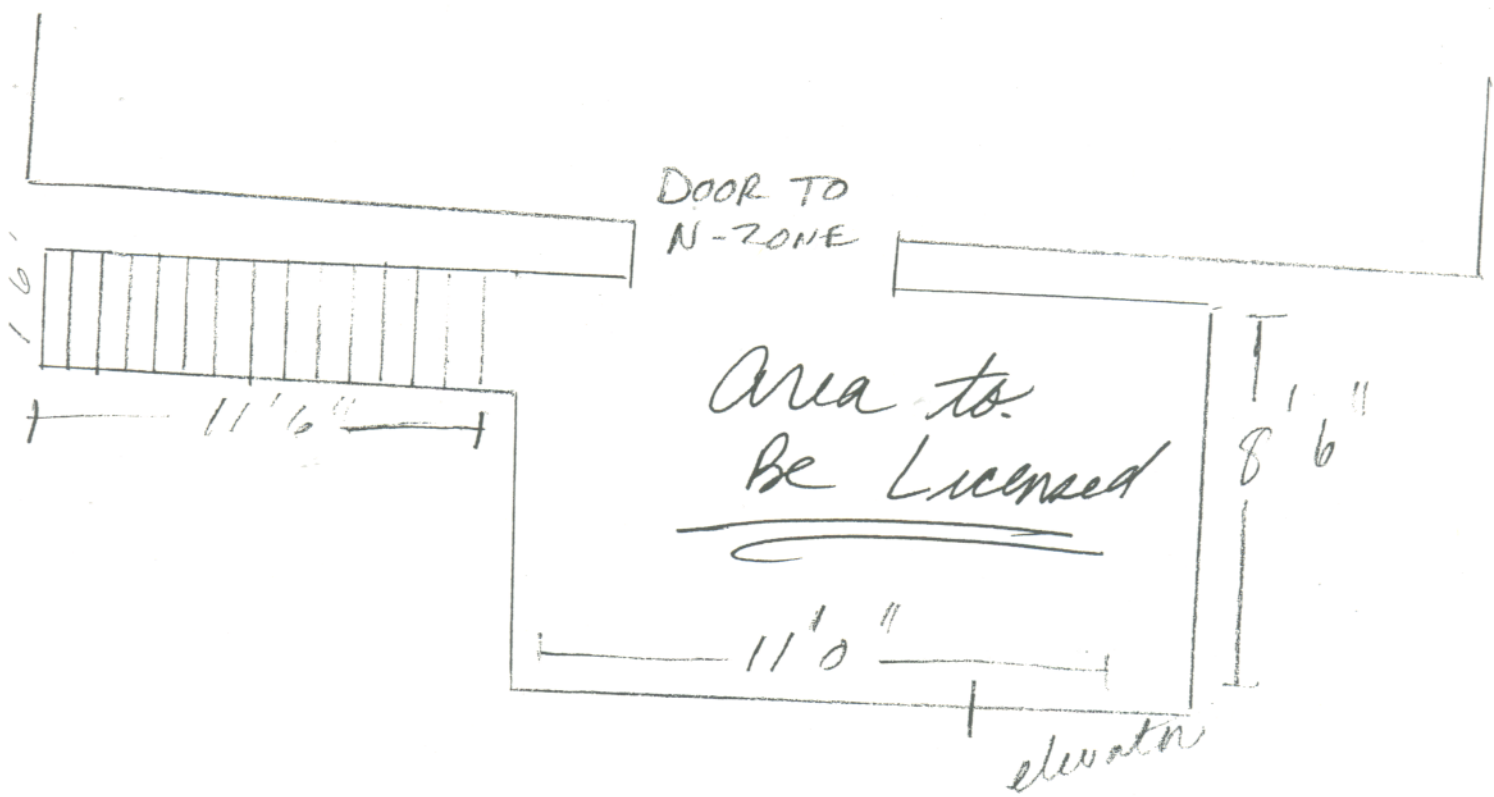
Sincerely  
Mike McCarty

Owner

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**NEBRASKA LIQUOR  
CONTROL COMMISSION**

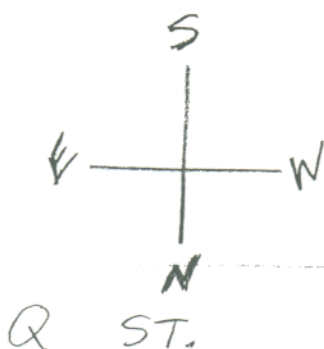


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NEBRASKA LIQUOR  
CONTROL COMMISSION





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NEBRASKA LIQUOR  
CONTROL COMMISSION

BACIANI  
RESTAURANT

THE N-ZONE

728 Q ST.

SINCLAIR  
HILL  
ASSOC.

811  
11' x  
8' x

AREA TO  
BE ADDED



11'0" x 8'6"

PARKING  
LOT

PARKING  
LOT

PARKING  
LOT

ALLEY - - - ALLEY - - - ALLEY - - -

HARDY  
BUILDING

LARSON  
FURN  
BUILDING

PARKING

ST.  
7' x